



HEALTH ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2006
OF THE CONDITION AND AFFAIRS OF THE
Aetna Health Inc. (a Michigan corporation)

NAIC Group Code 0001 0001 NAIC Company Code 95756 Employer's ID Number 23-2861565
(Current Period) (Prior Period)
Organized under the Laws of Michigan State of Domicile or Port of Entry Michigan
Country of Domicile United States
Licensed as business type: Life, Accident & Health [] Property/Casualty [] Hospital, Medical & Dental Service or Indemnity []
Dental Service Corporation [] Vision Service Corporation [] Health Maintenance Organization [X]
Other [] Is HMO Federally Qualified? Yes [] No [X]
Incorporated/Organized September 10, 1996 Commenced Business April 1, 1998
Statutory Home Office 26933 Northwestern Highway, Suite 100 Southfield MI..... 48033-4716
(Street and Number) (City, State and Zip Code)
Main Administrative Office 26933 Northwestern Highway, Suite 100
(Street and Number)
..... Southfield .. MI .. 48033-4716 248-208-8600
(City, State and Zip Code) (Area Code) (Telephone Number)
Mail Address 26933 Northwestern Highway, Suite 100 Southfield MI..... 48033-4716
(Street and Number or P. O. Box) (City, State and Zip Code)
Primary Location of Books and Records 980 Jolly Road
(Street and Number)
..... Blue Bell PA 19422-1904 800-872-3862
(City, State and Zip Code) (Area Code) (Telephone Number)
Internet Website Address www.aetna.com
Statutory Statement Contact James David Weiss 215-775-6508
(Name) (Area Code) (Telephone Number) (Extension)
..... Aetna.HMOReporting@aetna.com 215-775-6790
(E-mail Address) (Fax Number)
Policyowner Relations Contact Plan Sponsor Services, 151 Farmington Avenue, Hartford, CT 06156 800-247-5472
(Street and Number) (City, State and Zip Code) (Area Code) (Telephone Number)

OFFICERS

Allan Ira Greenberg, President
William Calvin Baskin III, Vice President and Secretary
James David Weiss, Controller

OTHER Burton Fred Vanderlaan, M.D., Senior Medical Director
Elaine Rose Cofrancesco, Treasurer #
Gregory Stephen Martino, Vice President
Kevin James Casey, Senior Investment Officer
Alicia Helene Bolton, Assistant Controller

DIRECTORS OR TRUSTEES

Allan Ira Greenberg Gregory Stephen Martino Burton Fred Vanderlaan, M.D.

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manuals except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)
Allan Ira Greenberg
President
State of..... Illinois
County of..... Cook
Subscribed and sworn to before me this
day of 2007

(Signature)
William Calvin Baskin III
Vice President and Secretary@
State of..... Connecticut
County of..... Hartford
@Subscribed and sworn to before me this
day of 2007

(Signature)
James David Weiss
Controller@
State of..... Pennsylvania
County of..... Montgomery
@@Subscribed and sworn to before me this
day of February 2007

NOTARY PUBLIC (Seal)

NOTARY PUBLIC (Seal)

NOTARY PUBLIC (Seal)

- a. Is this an original filing? Yes [X] No []
b. If no: 1. State the amendment number...
2. Date filed
3. Number of pages attached

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
A&H Premiums Due and Unpaid						
0199999. Total individuals.....	0	0	0	(439)	0	(439)
CRESCENT HOTELS & RESORTS.....	15,708	25,823	1,103	0	463	42,171
WAGEWORKS, INC.....	32,674	542	(1,204)	879	2,747	30,143
PANASONIC CORPORATIO.....	23,205	717	576	(1,864)	0	22,635
DICKINSON FINANCE GR.....	1,930	18,774	237	396	396	20,941
0299997. Group subscribers subtotal.....	73,517	45,856	712	(589)	3,606	115,890
0299998. Premiums due and unpaid not individually listed.....	43,415	(3,859)	909	2,440	16,639	26,266
0299999. Total group.....	116,932	41,997	1,621	1,851	20,245	142,156
0599999. Accident and health premiums due and unpaid (Page 2, Line 13).....	116,932	41,997	1,621	1,412	20,245	141,717

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
Pharmaceutical Rebate Receivables						
Aetna Health Management, LLC.....	.....6,186	.....0	.....0	.....0	.....0	.....6,186
0199999. Total Pharmaceutical Rebate Receivables.....	.....6,186	.....0	.....0	.....0	.....0	.....6,186
0799999. Total Health Care Receivables.....	.....6,186	.....0	.....0	.....0	.....0	.....6,186

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
Aging estimated based on claims in the process of adjudication as of 12/31/06.....	0	0	0	0	0	0
0199999. Individually listed claims unpaid.....	0	0	0	0	0	0
0299999. Aggregate accounts not individually listed - uncovered.....	2,253	0	0	0	472	2,725
0399999. Aggregate accounts not individually listed - covered.....	66,059	0	15	0	7,634	73,708
0499999. Subtotals.....	68,312	0	15	0	8,106	76,433
0599999. Unreported claim and other claim reserves.....						442,004
0799999. Total claims unpaid.....						518,437

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current

NONE

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5
Affiliate	Description	Amount	Current	Non-Current
Amounts Due To Parent, Subsidiaries and Affiliates				
Aetna Health Management, LLC.....	See Notes to Financial Statements.....	1,864,562	1,864,562	0
0199999. Individually listed payables.....		1,864,562	1,864,562	0
0399999. Total gross payables.....		1,864,562	1,864,562	0

EXHIBIT 7 - PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS

	1	2	3	4	5	6
Payment Method	Direct Medical Expense Payment	Column 1 as a % of Total Payment	Total Members Covered	Column 3 as a % of Total Members	Column 1 Expenses Paid to Affiliated Providers	Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups.....	17,962	0.4	1,710	100.0	0	17,962
2. Intermediaries.....	0	0.0	0	0.0	0	0
3. All other providers.....	151	0.0	0	0.0	0	151
4. Total capitation payments.....	18,113	0.4	1,710	100.0	0	18,113
Other Payments:						
5. Fee-for-service.....	365,864	7.1	XXX	XXX	0	365,864
6. Contractual fee payments.....	4,735,646	92.5	XXX	XXX	0	4,735,646
7. Bonus/withhold arrangements - fee-for-service.....	0	0.0	XXX	XXX	0	0
8. Bonus/withhold arrangements - contractual fee payments.....	0	0.0	XXX	XXX	0	0
9. Non-contingent salaries.....	0	0.0	XXX	XXX	0	0
10. Aggregate cost arrangements.....	0	0.0	XXX	XXX	0	0
11. All other payments.....	0	0.0	XXX	XXX	0	0
12. Total other payments.....	5,101,510	99.6	XXX	XXX	0	5,101,510
13. Total (Line 4 plus Line 12).....	5,119,623	100.0	XXX	XXX	0	5,119,623

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1	2	3	4	5	6
NAIC Code	Name of Intermediary	Capitation Paid	Average Monthly Capitation	Intermediary's Total Adjusted Capital	Intermediary's Authorized Control Level RBC

NONE

EXHIBIT 8 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

	1	2	3	4	5	6
Description	Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1. Administrative furniture and equipment.....	0	0	0	0	0	0
2. Medical furniture, equipment and fixtures.....	0	0	0	0	0	0
3. Pharmaceuticals and surgical supplies.....	0	0	0	0	0	0
4. Durable medical equipment.....	0	0	0	0	0	0
5. Other property and equipment.....	0	0	0	0	0	0
6. Total.....	0	0	0	0	0	0

NONE



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION.....Aetna Health Inc. (a Michigan corporation) 2. Grand Total

BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR (Location)

NAIC Group Code.....0001

NAIC Company Code.....95756

30.GT

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Stop Loss	11 Disability Income	12 Long-Term Care	13 Other
		2 Individual	3 Group										
Total Members at end of:													
1. Prior year.....	2,313	6	2,307	0	0	0	0	0	0	0	0	0	0
2. First quarter.....	1,979	5	1,974	0	0	0	0	0	0	0	0	0	0
3. Second quarter.....	1,815	5	1,810	0	0	0	0	0	0	0	0	0	0
4. Third quarter.....	1,645	5	1,640	0	0	0	0	0	0	0	0	0	0
5. Current year.....	1,710	5	1,705	0	0	0	0	0	0	0	0	0	0
6. Current year member months.....	22,136	59	22,077	0	0	0	0	0	0	0	0	0	0
Total Member Ambulatory Encounters for Year:													
7. Physician.....	22,105	59	22,046	0	0	0	0	0	0	0	0	0	0
8. Non-physician.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals.....	22,105	59	22,046	0	0	0	0	0	0	0	0	0	0
10. Hospital patient days incurred.....	483	0	483	0	0	0	0	0	0	0	0	0	0
11. Number of inpatient admissions.....	133	0	133	0	0	0	0	0	0	0	0	0	0
12. Health premiums written.....	6,144,147	0	6,144,147	0	0	0	0	0	0	0	0	0	0
13. Life premiums direct.....	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/casualty premiums written.....	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health premiums earned.....	6,150,912	0	6,150,912	0	0	0	0	0	0	0	0	0	0
16. Property/casualty premiums earned.....	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount paid for provision of health care services.....	5,119,623	0	5,119,508	0	0	0	115	0	0	0	0	0	0
18. Amount incurred for provision of health care services.....	4,908,421	0	4,908,563	0	0	0	(142)	0	0	0	0	0	0

(a) For health business: number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION.....Aetna Health Inc. (a Michigan corporation) 2. Michigan

BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR (Location)

NAIC Group Code.....0001

NAIC Company Code.....95756

30 MI

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Stop Loss	11 Disability Income	12 Long-Term Care	13 Other
		2 Individual	3 Group										
Total Members at end of:													
1. Prior year.....	2,313	6	2,307	0	0	0	0	0	0	0	0	0	0
2. First quarter.....	1,979	5	1,974	0	0	0	0	0	0	0	0	0	0
3. Second quarter.....	1,815	5	1,810	0	0	0	0	0	0	0	0	0	0
4. Third quarter.....	1,645	5	1,640	0	0	0	0	0	0	0	0	0	0
5. Current year.....	1,710	5	1,705	0	0	0	0	0	0	0	0	0	0
6. Current year member months.....	22,136	59	22,077	0	0	0	0	0	0	0	0	0	0
Total Member Ambulatory Encounters for Year:													
7. Physician.....	22,105	59	22,046	0	0	0	0	0	0	0	0	0	0
8. Non-physician.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals.....	22,105	59	22,046	0	0	0	0	0	0	0	0	0	0
10. Hospital patient days incurred.....	483	0	483	0	0	0	0	0	0	0	0	0	0
11. Number of inpatient admissions.....	133	0	133	0	0	0	0	0	0	0	0	0	0
12. Health premiums written.....	6,144,147	0	6,144,147	0	0	0	0	0	0	0	0	0	0
13. Life premiums direct.....	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/casualty premiums written.....	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health premiums earned.....	6,150,912	0	6,150,912	0	0	0	0	0	0	0	0	0	0
16. Property/casualty premiums earned.....	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount paid for provision of health care services.....	5,119,623	0	5,119,508	0	0	0	115	0	0	0	0	0	0
18. Amount incurred for provision of health care services.....	4,908,421	0	4,908,563	0	0	0	(142)	0	0	0	0	0	0

(a) For health business: number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

Statement as of December 31, 2006 of the **Aetna Health Inc. (a Michigan corporation)**

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1.	Book/adjusted carrying value, December 31 of prior year.....	0
2.	Increase (decrease) by adjustment:	
2.1	Totals, Part 1, Column 11.....	0
2.2	Totals, Part 3, Column 7.....	0
3.	Cost of acquired (Totals, Part 2, Column 6, net of encumbrances (Column 7) and net of additions and permanent improvements (Column 9)).....	0
4.	Cost of additions and permanent improvements:	
4.1	Totals, Part 1, Column 14.....	0
4.2	Totals, Part 3, Column 9.....	0
5.	Total profit (loss) on sales, Part 3, Column 14.....	0
6.	Increase (decrease) by foreign exchange adjustment:	
6.1	Totals, Part 1, Column 12.....	0
6.2	Totals, Part 3, Column 8.....	0
7.	Amounts received on sales, Part 3, Column 11 and Part 1, Column 13.....	0
8.	Book/adjusted carrying value at end of current period.....	0
9.	Total valuation allowance.....	0
10.	Subtotal (Lines 8 plus 9).....	0
11.	Total nonadmitted amounts.....	0
12.	Statement value, current period (Page 2, real estate lines, Net Admitted Assets column).....	0

NONE

SCHEDULE B - VERIFICATION BETWEEN YEARS

Mortgage Loans

1.	Book value/recorded investment excluding accrued interest of mortgages owned, December 31 of prior year.....	0
2.	Amount loaned during year:	
2.1	Actual cost at time of acquisitions.....	0
2.2	Additional investment made after acquisitions.....	0
3.	Accrual of discount and mortgage interest points and commitment fees.....	0
4.	Increase (decrease) by adjustment.....	0
5.	Total profit (loss) on sale.....	0
6.	Amounts paid on account or in full during the year.....	0
7.	Amortization of premium.....	0
8.	Increase (decrease) by foreign exchange adjustment.....	0
9.	Book value/recorded investment excluding accrued interest on mortgages owned at end of current period.....	0
10.	Total valuation allowance.....	0
11.	Subtotal (Lines 9 plus 10).....	0
12.	Total nonadmitted amounts.....	0
13.	Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets column).....	0

NONE

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Long-Term Invested Assets

1.	Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year.....	0
2.	Cost of acquisitions during year:	
2.1	Actual cost at time of acquisitions.....	0
2.2	Additional investment made after acquisitions.....	0
3.	Accrual of discount.....	0
4.	Increase (decrease) by adjustment.....	0
5.	Total profit (loss) on sale.....	0
6.	Amounts paid on account or in full during the year.....	0
7.	Amortization of premium.....	0
8.	Increase (decrease) by foreign exchange adjustment.....	0
9.	Book/adjusted carrying value of long-term invested assets at end of current period.....	0
10.	Total valuation allowance.....	0
11.	Subtotal (Lines 9 plus 10).....	0
12.	Total nonadmitted amounts.....	0
13.	Statement value of long-term invested assets at end of current period (Page 2, Line 7, Column 3).....	0

NONE

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments, Schedules D & DA (Group 1)											
1.1 Class 1.....	58,790	0	1,095,130	0	0	1,153,920	16.6	1,382,583	23.0	1,153,920	0
1.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	0	0
1.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	0	0
1.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	0	0
1.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	0	0
1.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals.....	58,790	0	1,095,130	0	0	1,153,920	16.6	1,382,583	23.0	1,153,920	0
2. All Other Governments, Schedules D & DA (Group 2)											
2.1 Class 1.....	0	0	0	0	0	0	0.0	0	0.0	0	0
2.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	0	0
2.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	0	0
2.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	0	0
2.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	0	0
2.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories and Possessions, etc., Guaranteed, Schedules D & DA (Group 3)											
3.1 Class 1.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1 Class 1.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0
5. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1 Class 1.....	0	0	0	0	0	0	0.0	1,395,853	23.2	0	0
5.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	0	0
5.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	0	0
5.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	0	0
5.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7 Totals.....	0	0	0	0	0	0	0.0	1,395,853	23.2	0	0

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusting Carrying Values By Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1 Class 1.....	929,302	0	0	0	0	929,302	13.4	0	0.0	614,816	314,486
6.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	0	0
6.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	0	0
6.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	0	0
6.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	0	0
6.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals.....	929,302	0	0	0	0	929,302	13.4	0	0.0	614,816	314,486
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Class 1.....	4,876,818	0	0	0	0	4,876,818	70.1	3,237,013	53.8	2,705,344	2,171,474
7.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	0	0
7.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	0	0
7.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	0	0
7.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	0	0
7.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	0	0
7.7 Totals.....	4,876,818	0	0	0	0	4,876,818	70.1	3,237,013	53.8	2,705,344	2,171,474
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Class 1.....	0	0	0	0	0	0	0.0	0	0.0	0	0
8.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	0	0
8.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	0	0
8.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	0	0
8.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	0	0
8.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Class 1.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0

Statement as of December 31, 2006 of the **Aetna Health Inc. (a Michigan corporation)**

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
10. Total Bonds Current Year											
10.1 Class 1.....	5,864,910	0	1,095,130	0	0	6,960,040	100.0	XXX	XXX	4,474,080	2,485,960
10.2 Class 2.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.3 Class 3.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.4 Class 4.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.5 Class 5.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.6 Class 6.....	0	0	0	0	0	(c) 0	0.0	XXX	XXX	0	0
10.7 Totals.....	5,864,910	0	1,095,130	0	0	(b) 6,960,040	100.0	XXX	XXX	4,474,080	2,485,960
10.8 Line 10.7 as a % of Col. 6.....	84.3	0.0	15.7	0.0	0.0	100.0	XXX	XXX	XXX	64.3	35.7
11. Total Bonds Prior Year											
11.1 Class 1.....	4,920,936	0	1,094,513	0	0	XXX	XXX	6,015,449	100.0	3,992,590	2,022,859
11.2 Class 2.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.3 Class 3.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.4 Class 4.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.5 Class 5.....	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
11.6 Class 6.....	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
11.7 Totals.....	4,920,936	0	1,094,513	0	0	XXX	XXX	(b) 6,015,449	100.0	3,992,590	2,022,859
11.8 Line 11.7 as a % of Col. 8.....	81.8	0.0	18.2	0.0	0.0	XXX	XXX	100.0	XXX	66.4	33.6
12. Total Publicly Traded Bonds											
12.1 Class 1.....	3,378,950	0	1,095,130	0	0	4,474,080	64.3	3,992,590	66.4	4,474,080	XXX
12.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.7 Totals.....	3,378,950	0	1,095,130	0	0	4,474,080	64.3	3,992,590	66.4	4,474,080	XXX
12.8 Line 12.7 as a % of Col. 6.....	75.5	0.0	24.5	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10.....	48.5	0.0	15.7	0.0	0.0	64.3	XXX	XXX	XXX	64.3	XXX
13. Total Privately Placed Bonds											
13.1 Class 1.....	2,485,960	0	0	0	0	2,485,960	35.7	2,022,859	33.6	XXX	2,485,960
13.2 Class 2.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.3 Class 3.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.4 Class 4.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.5 Class 5.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.6 Class 6.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.7 Totals.....	2,485,960	0	0	0	0	2,485,960	35.7	2,022,859	33.6	XXX	2,485,960
13.8 Line 13.7 as a % of Col. 6.....	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	XXX	100.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10.....	35.7	0.0	0.0	0.0	0.0	35.7	XXX	XXX	XXX	XXX	35.7

(a) Includes \$.....2,485,960 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$.....0 current year, \$.....0 prior year of bonds with Z designations and \$.....0 current year, \$.....0 prior year of bonds with Z* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class are under regulatory review.

(c) Includes \$.....0 current year, \$.....0 prior year of bonds with 5* designations and \$.....0 current year, \$.....0 prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Distribution by Type		1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1.	U.S. Governments, Schedules D & DA (Group 1)											
1.1	Issuer Obligations.....	58,790	0	1,095,130	0	0	1,153,920	16.6	1,382,583	23.0	1,153,920	0
1.2	Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7	Totals.....	58,790	0	1,095,130	0	0	1,153,920	16.6	1,382,583	23.0	1,153,920	0
2.	All Other Governments, Schedules D & DA (Group 2)											
2.1	Issuer Obligations.....	0	0	0	0	0	0	0.0	0	0.0	0	0
2.2	Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	0
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
2.3	Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4	Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
2.5	Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
2.6	Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
2.7	Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.	States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 3)											
3.1	Issuer Obligations.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.2	Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	0
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
3.3	Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.4	Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
3.5	Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.6	Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
3.7	Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.	Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1	Issuer Obligations.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.2	Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	0
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
4.3	Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4	Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
4.5	Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6	Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7	Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0
5.	Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1	Issuer Obligations.....	0	0	0	0	0	0	0.0	1,395,853	23.2	0	0
5.2	Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	0
	MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
5.3	Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
5.4	Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
	MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
5.5	Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6	Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7	Totals.....	0	0	0	0	0	0	0.0	1,395,853	23.2	0	0

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1 Issuer Obligations.....	929,302	0	0	0	0	929,302	13.4	0	0.0	614,816	314,486
6.2 Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
6.3 Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
6.4 Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
6.5 Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
6.6 Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals.....	929,302	0	0	0	0	929,302	13.4	0	0.0	614,816	314,486
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Issuer Obligations.....	4,876,818	0	0	0	0	4,876,818	70.1	3,237,013	53.8	2,705,344	2,171,474
7.2 Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
7.3 Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
7.4 Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
7.5 Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
7.6 Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
7.7 Totals.....	4,876,818	0	0	0	0	4,876,818	70.1	3,237,013	53.8	2,705,344	2,171,474
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Issuer Obligations.....	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Issuer Obligations.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9.2 Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
9.3 Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9.4 Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
9.5 Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9.6 Other.....	0	0	0	0	0	0	0.0	0	0.0	0	0
9.7 Totals.....	0	0	0	0	0	0	0.0	0	0.0	0	0

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values By Major Type and Subtype of Issues

	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 10.7	8 Total from Column 6 Prior Year	9 % from Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
Distribution by Type											
10. Total Bonds Current Year											
10.1 Issuer Obligations.....	5,864,910	0	1,095,130	0	0	6,960,040	100.0	XXX	XXX	4,474,080	2,485,960
10.2 Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
10.3 Defined.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.4 Other.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
10.5 Defined.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.6 Other.....	0	0	0	0	0	0	0.0	XXX	XXX	0	0
10.7 Totals.....	5,864,910	0	1,095,130	0	0	6,960,040	100.0	XXX	XXX	4,474,080	2,485,960
10.8 Line 10.7 as a % of Col. 6.....	84.3	0.0	15.7	0.0	0.0	100.0	XXX	XXX	XXX	64.3	35.7
11. Total Bonds Prior Year											
11.1 Issuer Obligations.....	4,920,936	0	1,094,513	0	0	XXX	XXX	6,015,449	100.0	3,992,590	2,022,859
11.2 Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
11.3 Defined.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.4 Other.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
11.5 Defined.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.6 Other.....	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.7 Totals.....	4,920,936	0	1,094,513	0	0	XXX	XXX	6,015,449	100.0	3,992,590	2,022,859
11.8 Line 11.7 as a % of Col. 8.....	81.8	0.0	18.2	0.0	0.0	XXX	XXX	100.0	XXX	66.4	33.6
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations.....	3,378,950	0	1,095,130	0	0	4,474,080	64.3	3,992,590	66.4	4,474,080	XXX
12.2 Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
12.3 Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.4 Other.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
12.5 Defined.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.6 Other.....	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.7 Totals.....	3,378,950	0	1,095,130	0	0	4,474,080	64.3	3,992,590	66.4	4,474,080	XXX
12.8 Line 12.7 as a % of Col. 6.....	75.5	0.0	24.5	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10.....	48.5	0.0	15.7	0.0	0.0	64.3	XXX	XXX	XXX	64.3	XXX
13. Total Privately Placed Bonds											
13.1 Issuer Obligations.....	2,485,960	0	0	0	0	2,485,960	35.7	2,022,859	33.6	XXX	2,485,960
13.2 Single Class Mortgage-Backed/Asset-Backed Securities.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES:											
13.3 Defined.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.4 Other.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ ASSET-BACKED SECURITIES:											
13.5 Defined.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.6 Other.....	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.7 Totals.....	2,485,960	0	0	0	0	2,485,960	35.7	2,022,859	33.6	XXX	2,485,960
13.8 Line 13.7 as a % of Col. 6.....	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	XXX	100.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10.....	35.7	0.0	0.0	0.0	0.0	35.7	XXX	XXX	XXX	XXX	35.7

SCHEDULE DA - PART 2 - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value December 31 of prior year.....	288,070	288,070	0	0	0
2. Cost of short-term investments acquired.....	3,544,425	3,544,425	0	0	0
3. Increase (decrease) by adjustment.....	0	0	0	0	0
4. Increase (decrease) by foreign exchange adjustment.....	0	0	0	0	0
5. Total profit (loss) on disposal of short-term investments.....	0	0	0	0	0
6. Consideration received on disposal of short-term investments.....	3,773,705	3,773,705	0	0	0
7. Book/adjusted carrying value, current year.....	58,790	58,790	0	0	0
8. Total valuation allowance.....	0	0	0	0	0
9. Subtotal (Lines 7 plus 8).....	58,790	58,790	0	0	0
10. Total nonadmitted amounts.....	0	0	0	0	0
11. Statement value (Lines 9 minus 10).....	58,790	58,790	0	0	0
12. Income collected during year	6,451	6,451	0	0	0
13. Income earned during year.....	6,751	6,751	0	0	0

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:.....

**Sch. DB-Pt.A-Verification Between Years
NONE**

**Sch. DB-Pt.B-Verification Between Years
NONE**

**Sch. DB-Pt.C-Verification Between Years
NONE**

**Sch. DB-Pt.D-Verification Between Years
NONE**

**Sch. DB-Pt.E-Verification
NONE**

**Sch. DB-Pt. F-Sn. 1
NONE**

**Sch. DB-Pt. F-Sn. 2
NONE**

**Sch. S-Pt. 1-Sn. 2
NONE**

**Sch. S-Pt. 2
NONE**

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Location	6 Type	7 Premiums	8 Unearned Premiums (estimated)	9 Reserve Credit Taken Other Than for Unearned Premiums	Outstanding Surplus Relief		12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
									10 Current Year	11 Prior Year		
Authorized General Account - Affiliates												
72052.....	23-2710210.....	..01/01/1999	Corporate Health Insurance Company.....	Pennsylvania.....	SSL/A/G.....	.....15,495	.....0	.....0	.....0	.....0	.....0	.....0
0199999.	Total - Authorized General Account - Affiliates.....					.....15,495	.....0	.....0	.....0	.....0	.....0	.....0
0399999.	Total - Authorized General Account.....					.....15,495	.....0	.....0	.....0	.....0	.....0	.....0
0799999.	Total - Authorized and Unauthorized General Account.....					.....15,495	.....0	.....0	.....0	.....0	.....0	.....0
1599999.	Totals.....					.....15,495	.....0	.....0	.....0	.....0	.....0	.....0

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 10 + 11 + 12 + 13 But Not in Excess of Col. 8

NONE

SCHEDULE S - PART 5

Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2006	2 2005	3 2004	4 2003	5 2002
A. OPERATIONS ITEMS					
1. Premiums.....	15	22	27	41	119
2. Title XVIII - Medicare.....	0	0	0	0	0
3. Title XIX - Medicaid.....	0	0	0	0	0
4. Commissions and reinsurance expense allowance.....	0	0	0	0	0
5. Total hospital and medical expenses.....	0	38	0	0	0
B. BALANCE SHEET ITEMS					
6. Premiums receivable.....	0	0	0	0	0
7. Claims payable.....	0	0	0	0	0
8. Reinsurance recoverable on paid losses.....	0	38	0	0	0
9. Experience rating refunds due or unpaid.....	0	0	0	0	0
10. Commissions and reinsurance expense allowances unpaid.....	0	0	0	0	0
11. Unauthorized reinsurance offset.....	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12. Funds deposited by and withheld from (F).....	0	0	0	0	0
13. Letters of credit (L).....	0	0	0	0	0
14. Trust agreements (T).....	0	0	0	0	0
15. Other (O).....	0	0	0	0	0

Statement as of December 31, 2006 of the **Aetna Health Inc. (a Michigan corporation)**

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 10).....	7,453,467	0	7,453,467
2. Accident and health premiums due and unpaid (Line 13).....	141,717	0	141,717
3. Amounts recoverable from reinsurers (Line 14.1).....	0	0	0
4. Net credit for ceded reinsurance.....	XXX	(1,197)	(1,197)
5. All other admitted assets (balance).....	166,589	0	166,589
6. Totals assets (Line 26).....	7,761,773	(1,197)	7,760,576
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1).....	518,437	0	518,437
8. Accrued medical incentive pool and bonus payments (Line 2).....	0	0	0
9. Premiums received in advance (Line 8).....	251,819	0	251,819
10. Reinsurance in unauthorized companies (Line 18).....	0	0	0
11. All other liabilities (balance).....	2,185,128	(1,197)	2,183,931
12. Total liabilities (Line 22).....	2,955,384	(1,197)	2,954,187
13. Total capital and surplus (Line 31).....	4,806,389	XXX	4,806,389
14. Total liabilities, capital and surplus (Line 32).....	7,761,773	(1,197)	7,760,576
NET CREDIT FOR CEDED REINSURANCE			
15. Claims unpaid.....	0		
16. Accrued medical incentive pool.....	0		
17. Premiums received in advance.....	0		
18. Reinsurance recoverable on paid losses.....	0		
19. Other ceded reinsurance recoverables.....	0		
20. Total ceded reinsurance recoverables.....	0		
21. Premiums receivable.....	0		
22. Unauthorized reinsurance.....	0		
23. Other ceded reinsurance payables/offsets.....	1,197		
24. Total ceded reinsurance payables/offsets.....	1,197		
25. Total net credit for ceded reinsurance.....	(1,197)		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.			Direct Business Only				6
			1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)		5 Deposit-Type Contracts
Totals							
1.	Alabama.....	AL	.....0	.....0	.....0	.....0	.....0
2.	Alaska.....	AK	.....0	.....0	.....0	.....0	.....0
3.	Arizona.....	AZ	.....0	.....0	.....0	.....0	.....0
4.	Arkansas.....	AR	.....0	.....0	.....0	.....0	.....0
5.	California.....	CA	.....0	.....0	.....0	.....0	.....0
6.	Colorado.....	CO	.....0	.....0	.....0	.....0	.....0
7.	Connecticut.....	CT	.....0	.....0	.....0	.....0	.....0
8.	Delaware.....	DE	.....0	.....0	.....0	.....0	.....0
9.	District of Columbia.....	DC	.....0	.....0	.....0	.....0	.....0
10.	Florida.....	FL	.....0	.....0	.....0	.....0	.....0
11.	Georgia.....	GA	.....0	.....0	.....0	.....0	.....0
12.	Hawaii.....	HI	.....0	.....0	.....0	.....0	.....0
13.	Idaho.....	ID	.....0	.....0	.....0	.....0	.....0
14.	Illinois.....	IL	.....0	.....0	.....0	.....0	.....0
15.	Indiana.....	IN	.....0	.....0	.....0	.....0	.....0
16.	Iowa.....	IA	.....0	.....0	.....0	.....0	.....0
17.	Kansas.....	KS	.....0	.....0	.....0	.....0	.....0
18.	Kentucky.....	KY	.....0	.....0	.....0	.....0	.....0
19.	Louisiana.....	LA	.....0	.....0	.....0	.....0	.....0
20.	Maine.....	ME	.....0	.....0	.....0	.....0	.....0
21.	Maryland.....	MD	.....0	.....0	.....0	.....0	.....0
22.	Massachusetts.....	MA	.....0	.....0	.....0	.....0	.....0
23.	Michigan.....	MI	.....0	.....0	.....0	.....0	.....0
24.	Minnesota.....	MN	.....0	.....0	.....0	.....0	.....0
25.	Mississippi.....	MS	.....0	.....0	.....0	.....0	.....0
26.	Missouri.....	MO	.....0	.....0	.....0	.....0	.....0
27.	Montana.....	MT	.....0	.....0	.....0	.....0	.....0
28.	Nebraska.....	NE	.....0	.....0	.....0	.....0	.....0
29.	Nevada.....	NV	.....0	.....0	.....0	.....0	.....0
30.	New Hampshire.....	NH	.....0	.....0	.....0	.....0	.....0
31.	New Jersey.....	NJ	.....0	.....0	.....0	.....0	.....0
32.	New Mexico.....	NM	.....0	.....0	.....0	.....0	.....0
33.	New York.....	NY	.....0	.....0	.....0	.....0	.....0
34.	North Carolina.....	NC	.....0	.....0	.....0	.....0	.....0
35.	North Dakota.....	ND	.....0	.....0	.....0	.....0	.....0
36.	Ohio.....	OH	.....0	.....0	.....0	.....0	.....0
37.	Oklahoma.....	OK	.....0	.....0	.....0	.....0	.....0
38.	Oregon.....	OR	.....0	.....0	.....0	.....0	.....0
39.	Pennsylvania.....	PA	.....0	.....0	.....0	.....0	.....0
40.	Rhode Island.....	RI	.....0	.....0	.....0	.....0	.....0
41.	South Carolina.....	SC	.....0	.....0	.....0	.....0	.....0
42.	South Dakota.....	SD	.....0	.....0	.....0	.....0	.....0
43.	Tennessee.....	TN	.....0	.....0	.....0	.....0	.....0
44.	Texas.....	TX	.....0	.....0	.....0	.....0	.....0
45.	Utah.....	UT	.....0	.....0	.....0	.....0	.....0
46.	Vermont.....	VT	.....0	.....0	.....0	.....0	.....0
47.	Virginia.....	VA	.....0	.....0	.....0	.....0	.....0
48.	Washington.....	WA	.....0	.....0	.....0	.....0	.....0
49.	West Virginia.....	WV	.....0	.....0	.....0	.....0	.....0
50.	Wisconsin.....	WI	.....0	.....0	.....0	.....0	.....0
51.	Wyoming.....	WY	.....0	.....0	.....0	.....0	.....0
52.	American Samoa.....	AS	.....0	.....0	.....0	.....0	.....0
53.	Guam.....	GU	.....0	.....0	.....0	.....0	.....0
54.	Puerto Rico.....	PR	.....0	.....0	.....0	.....0	.....0
55.	US Virgin Islands.....	VI	.....0	.....0	.....0	.....0	.....0
56.	Northern Mariana Islands.....	MP	.....0	.....0	.....0	.....0	.....0
57.	Canada.....	CN	.....0	.....0	.....0	.....0	.....0
58.	Aggregate Other Alien.....	OT	.....0	.....0	.....0	.....0	.....0
59.	Totals.....		.....0	.....0	.....0	.....0	.....0

NONE

SCHEDULE Y (Continued)

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
0.....	23-2229683.....	Aetna Inc.....	895,448,734	.....0	.....0	.....0	882,813,902	.....0	.....	.....0	1,778,262,636	.....0
72052.....	23-2710210.....	Corporate Health Insurance Company.....	(47,700,000)	.....0	.....0	.....0	(28,689,549)	(7,039,313)	.....	.....0	(83,428,862)	(17,367,867)
78700.....	06-0876836.....	Aetna Health and Life Insurance Company.....	7,890,564	.....0	14,000,000	.....0	40,587,604	(16,586,878)	.....	.....0	45,891,290	(1,221,493,441)
84450.....	57-0805126.....	Aetna Health Insurance Company of New York.....	(2,048,734)	.....0	.....0	.....0	(2,204,157)	.....0	.....	.....0	(4,252,891)	.....0
0.....	.....	Aetna Risk Indemnity Company Limited.....	.....0	.....0	.....0	.....0	.....0	(405,781)	.....	.....0	(405,781)	(7,335,487)
0.....	.....	Aetna Life & Casualty Bermuda Limited.....	.....0	.....0	.....0	.....0	(4,495,062)	.....0	.....	.....0	(4,495,062)	590,095
0.....	20-0446713.....	Aetna Behavioral Health, LLC.....	.....0	.....0	.....0	.....0	(4,861,713)	.....0	.....	.....0	(4,861,713)	.....0
0.....	38-3704481.....	Aetna Capital Management, LLC.....	.....0	.....0	.....0	.....0	2,532,060	.....0	.....	.....0	2,532,060	.....0
60054.....	06-6033492.....	Aetna Life Insurance Company.....	(757,093,645)	(29,091,683)	(14,000,000)	.....0	(928,404,124)	16,789,515	.....	16,000,000	(1,695,799,937)	1,220,673,792
0.....	06-1270755.....	AHP Holdings, Inc.....	(4,000,000)	(41,178,094)	.....0	.....0	8,092,937	.....0	.....	.....0	(37,085,157)	.....0
36153.....	06-1286276.....	Aetna Insurance Company of Connecticut.....	.....0	.....0	.....0	.....0	(193,370)	405,781	.....	.....0	212,411	7,335,487
0.....	06-1501445.....	CMBS Holdings, L.L.C.....	(15,345,000)	.....0	.....0	.....0	.....0	.....0	.....	.....0	(15,345,000)	.....0
0.....	20-3678459.....	Tanker Six, LLC.....	(1,754,097)	213,527	.....0	.....0	.....0	.....0	.....	.....0	(1,540,570)	.....0
0.....	.....	Canal Place, LLC.....	(550,000)	.....0	.....0	.....0	.....0	.....0	.....	.....0	(550,000)	.....0
0.....	.....	Azalea Mall, L.L.C.....	(416,047)	.....0	.....0	.....0	.....0	.....0	.....	.....0	(416,047)	.....0
0.....	20-3678339.....	PE Holdings, LLC.....	(300,000)	.....0	.....0	.....0	.....0	.....0	.....	.....0	(300,000)	.....0
0.....	81-0579372.....	Aetna Partners Diversified Fund, LLC.....	(60,126,738)	.....0	.....0	.....0	.....0	.....0	.....	(16,000,000)	(76,126,738)	.....0
0.....	.....	Aetna Partners Diversified Fund (Cayman), Limited.....	(10,464,620)	50,500,000	.....0	.....0	.....0	.....0	.....	.....0	40,035,380	.....0
0.....	20-3180700.....	Aetna Ventures, LLC.....	.....0	3,256,250	.....0	.....0	.....0	.....0	.....	.....0	3,256,250	.....0
0.....	.....	Broadspire National Services, Inc.....	.....0	1,300,000	.....0	.....0	.....0	.....0	.....	.....0	1,300,000	.....0
0.....	.....	Flagstone Church, LLC.....	.....0	15,000,000	.....0	.....0	.....0	.....0	.....	.....0	15,000,000	.....0
0.....	.....	ALEC Coinvestment Fund I, L.L.C.....	(3,540,417)	.....0	.....0	.....0	.....0	.....0	.....	.....0	(3,540,417)	.....0
0.....	30-0123754.....	Aetna Health Holdings, LLC.....	397,932,000	(13,200,000)	.....0	.....0	.....0	.....0	.....	.....0	384,732,000	.....0
95003.....	06-1345436.....	Aetna Health Inc. (AZ).....	(18,200,000)	.....0	.....0	.....0	(52,207,274)	(228,396)	.....	.....0	(70,635,670)	.....0
0.....	95-3402799.....	Aetna Health of California Inc.....	(27,000,000)	.....0	.....0	.....0	(140,848,738)	(50,000)	.....	.....0	(167,898,738)	.....0
95256.....	84-1312793.....	Aetna Health Inc. (CO).....	(3,700,000)	2,200,000	.....0	.....0	(15,990,003)	376,348	.....	.....0	(17,113,655)	689,598
95935.....	23-2442048.....	Aetna Health Inc. (CT).....	.....0	6,000,000	.....0	.....0	(20,911,594)	.....0	.....	.....0	(14,911,594)	.....0
95245.....	23-2470575.....	Aetna Health Inc. (DE).....	.....0	2,000,000	.....0	.....0	(3,638,665)	49,815	.....	.....0	(1,588,850)	119,895
95088.....	59-2411584.....	Aetna Health Inc. (FL).....	(147,800,000)	.....0	.....0	.....0	(296,178,950)	3,575,017	.....	.....0	(440,403,933)	.....0
95094.....	58-1649568.....	Aetna Health Inc. (GA).....	.....0	.....0	.....0	.....0	(41,754,368)	.....0	.....	.....0	(41,754,368)	.....0
95397.....	06-1055955.....	Aetna Health of Illinois Inc.....	(11,400,000)	.....0	.....0	.....0	(28,111,262)	(940,788)	.....	.....0	(40,452,050)	436,792
95590.....	52-1353802.....	Aetna Health Inc. (MD).....	(49,700,000)	.....0	.....0	.....0	(71,344,921)	3,422,342	.....	.....0	(117,622,579)	2,472,810
95236.....	52-1524249.....	Aetna Health Inc. (MA).....	(3,500,000)	.....0	.....0	.....0	(6,139,740)	(72,808)	.....	.....0	(9,712,548)	.....0
95756.....	23-2861565.....	Aetna Health Inc. (MI).....	.....0	.....0	.....0	.....0	(1,207,493)	170,574	.....	.....0	(1,036,919)	.....0
95810.....	23-2861568.....	Aetna Health Inc. (MO).....	.....0	1,000,000	.....0	.....0	(8,817,309)	.....0	.....	.....0	(7,817,309)	.....0
95237.....	23-2627296.....	Aetna Health Inc. (NH).....	.....0	.....0	.....0	.....0	(38,613)	.....0	.....	.....0	(38,613)	.....0
95287.....	52-1270921.....	Aetna Health Inc. (NJ).....	(7,900,000)	.....0	.....0	.....0	(324,120,882)	(2,351,472)	.....	.....0	(334,372,354)	10,964,623
95234.....	22-2663623.....	Aetna Health Inc. (NY).....	(70,900,000)	.....0	.....0	.....0	(96,299,078)	.....0	.....	.....0	(167,199,078)	.....0
95343.....	56-1941613.....	Aetna Health of the Carolinas Inc.....	.....0	.....0	.....0	.....0	(5,029,020)	125,759	.....	.....0	(4,903,261)	229,554
96518.....	34-1399736.....	Aetna Health Inc. (OH).....	(3,600,000)	.....0	.....0	.....0	(44,629,031)	(50,000)	.....	.....0	(48,279,031)	.....0
95757.....	23-2861563.....	Aetna Health Inc. (OK).....	(3,500,000)	.....0	.....0	.....0	(18,010,919)	255,280	.....	.....0	(21,255,639)	10,514
95109.....	23-2169745.....	Aetna Health Inc. (PA).....	(37,100,000)	.....0	.....0	.....0	(217,465,988)	(2,492,642)	.....	.....0	(257,058,630)	541,483
95006.....	62-1327181.....	Aetna Health Inc. (TN).....	(4,600,000)	1,000,000	.....0	.....0	(11,589,052)	(196,638)	.....	.....0	(15,385,690)	2,718
95490.....	76-0189680.....	Aetna Health Inc. (TX).....	.....0	.....0	.....0	.....0	(139,365,590)	4,789,882	.....	.....0	(134,575,708)	1,865,249
0.....	22-3187443.....	NYLCare Health Plans, Inc.....	21,868,000	.....0	.....0	.....0	.....0	.....0	.....	.....0	21,868,000	.....0
95517.....	01-0504252.....	Aetna Health Inc. (ME).....	.....0	.....0	.....0	.....0	(26,380,657)	508,223	.....	.....0	(25,872,434)	264,185
47060.....	91-1662406.....	Aetna Health Inc. (WA).....	.....0	.....0	.....0	.....0	(4,107,279)	.....0	.....	.....0	(4,107,279)	.....0

SCHEDULE Y (Continued)

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
0.....	06-1160812.....	Aetna Dental of California Inc.....	.....(15,500,000)	.....0	.....0	.....0	.....(18,427,801)	.....0	.....	.....0	.....(33,927,801)	.....0
11183.....	22-2990909.....	Aetna Dental Inc. (NJ).....	.....0	.....1,000,000	.....0	.....0	.....(2,324,655)	.....0	.....	.....0	.....(1,324,655)	.....0
95910.....	06-1177531.....	Aetna Dental Inc. (TX).....	.....(15,400,000)	.....0	.....0	.....0	.....(14,606,203)	.....(53,820)	.....	.....0	.....(30,060,023)	.....0
0.....	13-3670795.....	Aetna Health Management, LLC.....	.....0	.....0	.....0	.....0	.....1,365,222,123	.....0	.....	.....0	.....1,365,222,123	.....0
0.....	30-0123760.....	Aetna RX Home Delivery, LLC.....	.....0	.....0	.....0	.....0	.....183,941,729	.....0	.....	.....0	.....183,941,729	.....0
12328.....	20-2207534.....	Aetna Family Plans of Georgia Inc.....	.....0	.....0	.....0	.....0	.....(48,048)	.....0	.....	.....0	.....(48,048)	.....0
0.....	57-0640344.....	Strategic Resource Company.....	.....0	.....0	.....0	.....0	.....56,953,358	.....0	.....	.....0	.....56,953,358	.....0
0.....	04-3134551.....	Chickering Claims Administrators, Inc.....	.....0	.....0	.....0	.....0	.....20,481,521	.....0	.....	.....0	.....20,481,521	.....0
0.....	04-2708160.....	Chickering Benefit Planning Insurance Agency, Inc.....	.....0	.....0	.....0	.....0	.....17,815,874	.....0	.....	.....0	.....17,815,874	.....0
9999999.....	Control Totals.....	.....	.....0	.....0	.....0	.....0	.....0	.....0	XXX	.....0	.....0	.....0

Statement as of December 31, 2006 of the **Aetna Health Inc. (a Michigan corporation)**

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

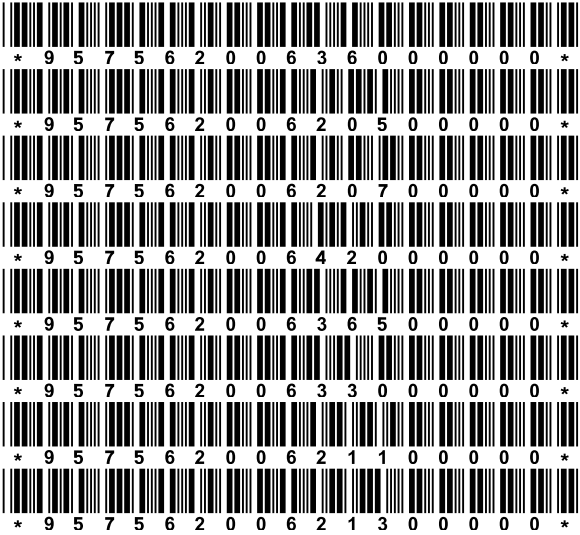
MARCH FILING		Responses
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will an actuarial opinion be filed by March 1?	YES
3.	Will the Risk-Based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
APRIL FILING		
5.	Will the Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
7.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
JUNE FILING		
8.	Will an audited financial report be filed by June 1?	YES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING		
9.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
10.	Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	NO
11.	Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?	NO
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
APRIL FILING		
14.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
15.	Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	NO
16.	Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?	NO

EXPLANATIONS:

BAR CODE:



**Overflow Page
NONE**

**Overflow Page
NONE**



PROPERTY/CASUALTY SUPPLEMENTS

NONE

TO BE FILED ON OR BEFORE MARCH 1

For the Year Ended December 31, 2006

Of the.....Aetna Health Inc. (a Michigan corporation)

ADDRESSSouthfield MI 48033-4716

NAIC Group Code.....0001

NAIC Company Code.....95756

Employer's ID Number.....23-2861565

Sch. F-Pt. 1

NONE

Sch. F-Pt. 3

NONE

Sch. P-Pt. 1-Summary

NONE

Sch. P-Pt. 1A

NONE

Sch. P-Pt. 1B

NONE

Sch. P-Pt. 1C

NONE

Sch. P-Pt. 1D

NONE

Sch. P-Pt. 1E

NONE

Sch. P-Pt. 1F-Sn. 1

NONE

Sch. P-Pt. 1F-Sn. 2

NONE

Sch. P-Pt. 1G

NONE

Sch. P-Pt. 1H-Sn. 1

NONE

Sch. P-Pt. 1H-Sn. 2

NONE

Sch. P-Pt. 1I

NONE

Sch. P-Pt. 1J

NONE

Sch. P-Pt. 1K

NONE

Sch. P-Pt. 1L

NONE

Sch. P-Pt. 1M

NONE

Sch. P-Pt. 1N

NONE

Sch. P-Pt. 1O

NONE

Sch. P-Pt. 1P
NONE

Sch. P-Pt. 1R-Sn. 1
NONE

Sch. P-Pt. 1R-Sn. 2
NONE

Sch. P-Pt. 1S
NONE

Sch. P-Pt. 2-Summary
NONE

Sch. P-Pt. 2A
NONE

Sch. P-Pt. 2B
NONE

Sch. P-Pt. 2C
NONE

Sch. P-Pt. 2D
NONE

Sch. P-Pt. 2E
NONE

Sch. P-Pt. 2F-Sn. 1
NONE

Sch. P-Pt. 2F-Sn. 2
NONE

Sch. P-Pt. 2G
NONE

Sch. P-Pt. 2H-Sn. 1
NONE

Sch. P-Pt. 2H-Sn. 2
NONE

Sch. P-Pt. 2I
NONE

Sch. P-Pt. 2J
NONE

Sch. P-Pt. 2K
NONE

Sch. P-Pt. 2L
NONE

Sch. P-Pt. 2M
NONE

Sch. P-Pt. 2N
NONE

Sch. P-Pt. 2O
NONE

Sch. P-Pt. 2P
NONE

Sch. P-Pt. 2R-Sn. 1
NONE

Sch. P-Pt. 2R-Sn. 2
NONE

Sch. P-Pt. 2S
NONE

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....0001 NAIC Company Code....95756

BUSINESS IN GRAND TOTAL DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.1 Allied lines.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.2 Multiple peril crop.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2.3 Federal flood.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. Farmowners multiple peril.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Homeowners multiple peril.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.1 Commercial multiple peril (non-liability portion).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. Mortgage guaranty.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
8. Ocean marine.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9. Inland marine.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
10. Financial guaranty.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical malpractice.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
12. Earthquake.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
13. Group accident and health (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit A & H (group and individual).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable A&H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable A & H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable A & H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.4 Non-renewable for stated reasons only (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.5 Other accident only.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.6 All other A & H (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.7 Federal employees health benefits program premium (b).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
16. Workers' compensation.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Other liability.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18. Products liability.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.1 Private passenger auto no-fault (personal injury protection).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Other private passenger auto liability.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Commercial auto no-fault (personal injury protection).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Other commercial auto liability.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.1 Private passenger auto physical damage.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
21.2 Commercial auto physical damage.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
22. Aircraft (all perils).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
23. Fidelity.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
24. Surety.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
26. Burglary and theft.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
27. Boiler and machinery.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
28. Credit.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
33. Aggregate write-ins for other lines of business.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
34. TOTALS (a).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

DETAILS OF WRITE-INS

3301. ....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3302. ....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3303. ....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3398. Summary of remaining write-ins for Line 33 from overflow page...	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3399. TOTALS (Lines 3301 thru 3303 plus 3398) (Line 33 above).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0

(a) Finance and service charges not included in Lines 1 to 34 \$.0.
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

PS32.GT

PS33

NONE